

San Francisco Residential Rent Stabilization and Arbitration Board

If you require this form in Spanish, Chinese or Filipino, please call 415-252-4600 or visit the Rent Board's office at 25 Van Ness Avenue, #320, San Francisco.	
Si necesita este formulario en español, por favor llame al 415-252-4600 o visite a la oficina de La Junta del Control de Rentas en 25 Van Ness Avenue, #320, San Francisco.	
如果您需要此表格的中文版本,請致電 415-252-4600 或造訪租務委員會 辦公室,地址是: 25 Van Ness Avenue, #320, San Francisco。	
Kung kailangan ninyo ng form na ito sa Filipino, mangyaring tumawag sa 415-252-4600 o pumunta sa opisina ng San Francisco Rent Board na matatagpuan sa 25 Van Ness Avenue, #320, San Francisco.	Rent Board Date Stamp
INFORMATION REGARDING TENANT OBJECTION TO OWNER'S ADU DE	CLARATION AND REQUEST FOR HEARING:
(1) This Tenant Objection form must be filed within 30 calendar days of ADU Declaration and Notice re ADU construction pursuant to Planning a weekend or legal holiday, this Tenant Objection form may be filed on	the date the tenant was provided the <i>Owner's</i> Code Section 207(c){4). If the 30th day falls on
(2) The tenant must specify below the particular statement(s) in the Owner and attach any evidence the tenant has to show that the statements in	
TENANT OBJECTION TO OWNER'S ADU DECLARATION [Pursuant to Planning Code §207)	· · · · · · · · · · · · · · · · · · ·
Date that Owner provided the Owner's ADU Declaration and Notice re ADU construction	ase Number for Owner's ADU Declaration (if known)
Tenant's First Name Middle Initial	Last Name
	San Francisco, CA
Street Number of Tenant's Unit Street Name Unit Number	Zip Code
Primary Phone Number Email Address	s
I am requesting a hearing on the Owner's ADU Declaration and whether any tenant housing services will be removed or substaproposed ADU project in violation of Rent Ordinance Section 3. I dispute the following statement(s) in the Owner's ADU Dec	request that the Rent Board determine intially reduced as a result of the 7.2(r):
I am requesting a hearing on the Owner's ADU Declaration and whether any tenant housing services will be removed or substaproposed ADU project in violation of Rent Ordinance Section 3	request that the Rent Board determine intially reduced as a result of the 7.2(r): laration:
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Frenant Representative Information (if applicable) •	▼	Non-attorney	y Representative	Interprete	
First Name (PLEASE PRINT)	Middle	e Initial		Last Name	
Mailing Address: Street Number Street Name	Unit Number	City	State	Zip Code	
Primary Phone Number	Email Address				
♦ Owner Information					
First Name (PLEASE PRINT)	Middle	e Initial		Last Name	
Mailing Address: Street Number Street Name	Unit Number	City	State	Zip Code	
Primary Phone Number	Email Address				
▼ Owner Representative or Property Manager Inforr	nation (if applicat	ole) ↓			
First Name (PLEASE PRINT)	Middle Initial	Middle Initial Last Na		me	
Mailing Address: Street Number Street Name	Unit Number	City	State	Zip Code	
Primary Phone Number	Email Address				
▼ Declaration ▼					
I declare under penalty of perjury under the laws Objection and Request for Hearing and every att knowledge and belief.					
Tenant's Signature			Date		